is to be preceded by a cleansing enema of plain water and two to four drams of sodium salicylate are then incorporated in an enema of six ounces of starch water and from five to ten drops of tincture of opium. This enema is, as a rule, readily retained. Heyn says that this procedure has been resorted to in 22 cases, 5 of which were not typical instances of acute rheumatic fever, but the therapeutic test was nevertheless applied. No unfortunate results happened in any instance, though frequently the dosage reached 240 grains daily. One case only was intolerant to the remedy, owing to a previous irritability of the rectum. All typical cases were more or less benefited, and these results obtained with the rectal administration of sodium salicylate should warrant its use, not only in cases in which the stomach is intolerant, but, where possible, as a routine measure.

The Treatment of Chronic Cardiac Insufficiency by Intravenous Injections of Strophanthin.—Fraenkel (*Münch. med. Woch.*, 1912, lix, 289, 371) advocates the intravenous injection of strophanthin in certain cases of cardiac insufficiency, especially when digitalis treatment fails to benefit. A sovereign indication for this method of treatment is pulmonary congestion due to acute dilatation of the heart. A single injection of strophanthin is often sufficient to relieve the patient of distressing symptoms in some cases, and subsequently the improvement may be maintained by digitalis preparations given by mouth. Fraenkel uses Strophanthin Boehringer, giving as the initial dose 0.5 milligram that may be repeated twenty-four hours by a second dose. His usual practice is to repeat the dose only when the favorable effect from the previous dose is no longer apparent. He relates a case in detail of a woman with a valvular lesion and chronic myocarditis who was made very confortable by small repeated injections of strophanthin. This patient was not able to take digitalis by mouth, but there were no untoward symptoms from the strophanthin injections, and during the course of a year and a half she received 85 injections. At the end of the treatment the ascites, that had previously necessitated frequent tapping, had entirely disappeared, and the formerly congested and painful liver had become much smaller. The patient was able to walk comfortably on level ground, and no longer required morphine at night to make her sleep.

PEDIATRICS

UNDER THE CHARGE OF

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The Effect of Summer Heat on Infants and Children.—Eugen Schlesinger (*Deutsch. med. Woch.*, 1912, xxxviii, 558), in a discussion of the almost unprecedented mortality among infants during the preceding summer in the larger German cities, shows that housing and environment modify greatly the general effect of summer heat on infant mortality. From the mortality curves of three localities having the same climatic conditions, and in which the milk supply and general care of infants were practically identical, it is seen that the infant mortality of one of these localities rises higher to a marked degree during July and August than that of the other two places. In the first locality the houses were packed one against the other, the whole district congested, with no open spaces around the dwellings. The fact that the rooms and houses did not cool off during nightfall, that air currents could not vary the temperature, and that practically a heat stagnation existed accounts for the high mortality in this district. The other districts were less congested and the houses spared to some extent admitting air, and the heat was more intermittent. Long sustained, high, room temperature plus humidity and air stagnation are therefore important factors which modify the general effect of summer heat on infants. Among other effects of summer heat were found frequent cases of "heat stroke" in children similar to that found in adults. The symptoms comprised coma and convulsions, increased temperature and continued unconsciousness ending in death within a few days. These cases occurred among the apparently well nourished children fed on some prepared or condensed baby food. The general effect of summer heat is to lower resistance and vitality in the healthy child, causing at times elevation of temperature; to retard the improvement in bottle fed babies; to reduce tolerance; to nourishment and to augment the severity of gastro-intestinal diseases. Changes in diet and general hygiene are of vast importance during summer heat. Food should be less concentrated and even reduced in bulk. A liberal quantity of liquid should be given. Frequent cool and tepid sponging and light clothing both day and night are imperative, especially in congested districts. In older children, aged from six to ten years, it was found that 30 per cent. in 260 lost appreciably in weight from May to August. Schlesinger attributed this expecially to the effect of summer heat in school-rooms, with their attendant air stagnation and humidity. After seven weeks' vacation, although the heat remained intense, the children had regained the weight lost and many had added to their forme weight.

Lordotic Albuminuria.—FRANZ HAMBURGER (*Wien. klin. Woch.*, 1912, xxv, 262) agrees with Jehles' discovery that in many children an albuminuria can be caused or increased by a lordosis. There is no doubt that most of the so-called albuminuria of puberty can be traced back to a lordosis in the lumbar vertebræ and that a lordotic albuminuria depends upon a blood stasis in the kidneys: another theory is that both kinds of albuminuria are influenced by nervous and vasomotor changes. There is no doubt that most individuals with lordotic albuminuria have vasomotor disturbances and that the large number of cases occurring in children, aged from seven to fifteen years, is due to the fact that during the period of puberty the vasomotor system is especially unstable and irritable. Individuals with angioneurotic or "vasomotor" tendencies will react more with an albuminuria in lordosis than will normal, healthy individuals. The same person under the same conditions may show albuminuria at one time, and at another show only a slight amount or none at all. This is probably due to